PARENT PERMISSION FORM FOR FIELD TRIP PARTICIPATION

Dear Parent or Legal Guardian:

Your son/daughter is eligible to participate in a catechetical or youth ministry sponsored activityrequiring transportation to a location away from parish facilities. This activity will take place under the guidance and the supervision of staff from St. Regis Parish. A brief description of the activity follows: NAME OF EVENT: **PBJ Outreach Service Project**

DESTINATION: 6a PREP AT: OLGC Parish - 47650 N Territorial Rd, Plymouth, MI ; we will change locations after prep is completed to 7:30a SERVING AT: Cass Corridor - corner of Martin Luther King and 3rd Ave, Detroit, MI

DESIGNATED ADMINISTRATOR OF ACTIVITY: Leesa Hansknecht TELEPHONE 248-646-2686 x5046 / Cell during event: 248-420-7439

DATE AND TIME OF DEPARTURE: Saturday, August 23, 2014 @ 5:30a from St. Regis parking lot DATE AND TIME OF RETURN: Saturday, August 2, 2014 @ apx. 10:00a at St. Regis parking lot

METHOD OF TRANSPORTATION: Carpool STUDENT COST: FREE

If you would like to participate in this event, please complete, sign and return the following statement of consent and release of liability. As parent or legal guardian, you remain fully responsible for any legal responsibility, which may result from any personal actions by the named student.

Any specific medical needs that the administrator should be aware of? YES____NO____ If yes, please explain.

I hearby consent to participation by my child, _______ in the event described above. I understand that this event will take place away from the parish facilities and that my child will be under the supervision of the designated staff person on the stated dates. I further consent to the conditions stated above on participation in this event, including the method of transportation. In consideration of my child being allowed to participate in this event, I covenant not to sue or bring any cause of action against St. Regis Parish and any affiliated entity, employee or agent for any claim caused by it or them, whether negligently or otherwise, arising out of or relating to my child's participation in this event. I also agree to indemnify, including attorneys fees, and hold harmless the Parish and any affiliated entity, employee or otherwise of it or them arising out of or relating to my child's participation in this event.

PLEASE RETURN THIS FORM BY:

PRINT PARENT/LEGAL GUARDIAN NAME

PARENT/LEGAL GUARGIAN SIGNATURE

TELEPHONE NUMBER

DATE